



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Office Use Only

Section 1: Cover Sheet

Use this form to:

- 1) Register as a lobbyist in accordance with City Code Section 4-8-5;
- 2) Amend or update registration information previously provided in accordance with City Code Section 4-8-5;
- 3) Terminate registration as a lobbyist per City Code Section 4-8-5;
- 4) Report lobbying activities engaged in during the preceding calendar quarter in accordance with Section 4-8-6 of the City Code; or
- 5) For entities electing to register and report as a business entity per City Code Section 4-8-4, this form must be filled out for each individual lobbyist employed by the entity.

For detailed instructions on how to complete this form, see the **Lobbyist Reporting Form: Individual Reporting Guide**

This form must be submitted in its original digital format. Please do not print or scan this form.

LOBBYIST NAME	<table> <tr> <td>Title</td> <td>First Name*</td> <td>Middle</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text" value="Leah"/></td> <td><input type="text" value="M"/></td> </tr> <tr> <td>Last Name*</td> <td colspan="2">Suffix</td> </tr> <tr> <td><input type="text" value="Bojo"/></td> <td colspan="2"><input type="text"/></td> </tr> </table> <p><input type="checkbox"/> My employer is a 501c(3) non-profit organization</p>	Title	First Name*	Middle	<input type="text"/>	<input type="text" value="Leah"/>	<input type="text" value="M"/>	Last Name*	Suffix		<input type="text" value="Bojo"/>	<input type="text"/>	
Title	First Name*	Middle											
<input type="text"/>	<input type="text" value="Leah"/>	<input type="text" value="M"/>											
Last Name*	Suffix												
<input type="text" value="Bojo"/>	<input type="text"/>												
EMPLOYING ENTITY	<p><input checked="" type="checkbox"/> My employer is registered as a business entity, pays an entity registration fee, and is reporting on my behalf</p> <p>Entity/Organization Name*</p> <input type="text" value="Drenner Group"/>												
LOBBYIST PERMANENT BUSINESS STREET ADDRESS	<table> <tr> <td>Permanent Business Street Address*</td> <td colspan="2">Apartment or Suite Number</td> </tr> <tr> <td><input type="text" value="200 Lee Barton Drive"/></td> <td colspan="2"><input type="text" value="100"/></td> </tr> <tr> <td>City*</td> <td>State*</td> <td>Zip Code*</td> </tr> <tr> <td><input type="text" value="Austin"/></td> <td><input type="text" value="TX"/></td> <td><input type="text" value="78704"/></td> </tr> </table>	Permanent Business Street Address*	Apartment or Suite Number		<input type="text" value="200 Lee Barton Drive"/>	<input type="text" value="100"/>		City*	State*	Zip Code*	<input type="text" value="Austin"/>	<input type="text" value="TX"/>	<input type="text" value="78704"/>
Permanent Business Street Address*	Apartment or Suite Number												
<input type="text" value="200 Lee Barton Drive"/>	<input type="text" value="100"/>												
City*	State*	Zip Code*											
<input type="text" value="Austin"/>	<input type="text" value="TX"/>	<input type="text" value="78704"/>											
LOBBYIST BUSINESS MAILING ADDRESS	<table> <tr> <td>Business Mailing Address*</td> <td colspan="2">Apartment or Suite Number</td> </tr> <tr> <td><input type="text" value="200 Lee Barton Drive"/></td> <td colspan="2"><input type="text" value="100"/></td> </tr> <tr> <td>City*</td> <td>State*</td> <td>Zip Code*</td> </tr> <tr> <td><input type="text" value="Austin"/></td> <td><input type="text" value="TX"/></td> <td><input type="text" value="78704"/></td> </tr> </table>	Business Mailing Address*	Apartment or Suite Number		<input type="text" value="200 Lee Barton Drive"/>	<input type="text" value="100"/>		City*	State*	Zip Code*	<input type="text" value="Austin"/>	<input type="text" value="TX"/>	<input type="text" value="78704"/>
Business Mailing Address*	Apartment or Suite Number												
<input type="text" value="200 Lee Barton Drive"/>	<input type="text" value="100"/>												
City*	State*	Zip Code*											
<input type="text" value="Austin"/>	<input type="text" value="TX"/>	<input type="text" value="78704"/>											

* Indicates a required field



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REPORT TYPE *

Check all that apply

- I am registering as a new lobbyist
- I am renewing my annual lobbyist registration
- I am updating my current registration information outside of a Quarterly Activity Reporting Period
- I am submitting my Quarterly Activity Report, including client compensation and expenditures, for the following activity reporting deadline:
 - January
 - April
 - July
 - October
- I am correcting the information provided on a previously filed report
 - Previous Report Type:
 - Previous Report Date
- I am terminating my Lobbyist Registration with the City of Austin and this report is my final activity report.



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Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning																
PROPERTY ADDRESS OR LEGAL DESCRIPTION	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description is required.																
	<table style="width: 100%; border: none;"> <tr> <td style="border: none;">Address</td> <td style="border: none;">Suite or Apartment Number</td> </tr> <tr> <td style="border: 1px solid black; background-color: #f8d7da;">500 Montopolis</td> <td style="border: 1px solid black; background-color: #f8d7da;"></td> </tr> <tr> <td style="border: none;">City</td> <td style="border: none;">State</td> <td style="border: none;">Zip Code</td> </tr> <tr> <td style="border: 1px solid black; background-color: #f8d7da;">Austin</td> <td style="border: 1px solid black; background-color: #f8d7da;">TX</td> <td style="border: 1px solid black; background-color: #f8d7da;">78741</td> </tr> <tr> <td colspan="3" style="border: none;">Property Legal Description</td> </tr> <tr> <td colspan="3" style="border: 1px solid black; background-color: #f8d7da;"></td> </tr> </table>	Address	Suite or Apartment Number	500 Montopolis		City	State	Zip Code	Austin	TX	78741	Property Legal Description					
Address	Suite or Apartment Number																
500 Montopolis																	
City	State	Zip Code															
Austin	TX	78741															
Property Legal Description																	

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|---|---|
| <input type="checkbox"/> Accessibility or Persons with Disabilities | <input type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input type="checkbox"/> Permits (Building, Site Plans) |
| <input type="checkbox"/> Affordability | <input type="checkbox"/> Finance, Budget, or Investments | <input type="checkbox"/> Permits (Other) |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center | <input type="checkbox"/> Quality of Life Affairs |
| <input type="checkbox"/> Aviation | <input type="checkbox"/> Human Rights or Immigration | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> City Infrastructure or Public Works | <input type="checkbox"/> Labor or Workforce | <input type="checkbox"/> Rules, Proposed Rules, or Rule Making |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input type="checkbox"/> Land Development or Land Use | <input type="checkbox"/> Taxation or Fees |
| <input type="checkbox"/> Code Compliance | <input type="checkbox"/> Municipal Court | <input type="checkbox"/> Technology or Communications |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Municipal Legislation | <input type="checkbox"/> Transportation or Mobility |
| <input type="checkbox"/> Contracts or Procurement | <input type="checkbox"/> Neighborhoods | <input checked="" type="checkbox"/> Zoning or Platting |
| <input type="checkbox"/> Diversity, Equity, or Inclusion | <input type="checkbox"/> Parks, Recreation, Libraries, or Museums | |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Other: <input style="width: 50px;" type="text"/> | |

Add Additional Municipal Question

Delete this page



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Right of way vacation																
PROPERTY ADDRESS OR LEGAL DESCRIPTION	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description is required.																
	<table style="width: 100%; border: none;"> <tr> <td style="border: none;">Address</td> <td style="border: none;">Suite or Apartment Number</td> </tr> <tr> <td style="border: 1px solid black; background-color: #f8d7da;">711 Trinity Street</td> <td style="border: 1px solid black; background-color: #f8d7da;"></td> </tr> <tr> <td style="border: none;">City</td> <td style="border: none;">State</td> <td style="border: none;">Zip Code</td> </tr> <tr> <td style="border: 1px solid black; background-color: #f8d7da;">Austin</td> <td style="border: 1px solid black; background-color: #f8d7da;">TX</td> <td style="border: 1px solid black; background-color: #f8d7da;">78701</td> </tr> <tr> <td colspan="3" style="border: none;">Property Legal Description</td> </tr> <tr> <td colspan="3" style="border: 1px solid black; background-color: #f8d7da;"></td> </tr> </table>	Address	Suite or Apartment Number	711 Trinity Street		City	State	Zip Code	Austin	TX	78701	Property Legal Description					
Address	Suite or Apartment Number																
711 Trinity Street																	
City	State	Zip Code															
Austin	TX	78701															
Property Legal Description																	

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|---|---|
| <input type="checkbox"/> Accessibility or Persons with Disabilities | <input type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input type="checkbox"/> Permits (Building, Site Plans) |
| <input type="checkbox"/> Affordability | <input type="checkbox"/> Finance, Budget, or Investments | <input type="checkbox"/> Permits (Other) |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center | <input type="checkbox"/> Quality of Life Affairs |
| <input type="checkbox"/> Aviation | <input type="checkbox"/> Human Rights or Immigration | <input checked="" type="checkbox"/> Real Estate |
| <input type="checkbox"/> City Infrastructure or Public Works | <input type="checkbox"/> Labor or Workforce | <input type="checkbox"/> Rules, Proposed Rules, or Rule Making |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input type="checkbox"/> Land Development or Land Use | <input type="checkbox"/> Taxation or Fees |
| <input type="checkbox"/> Code Compliance | <input type="checkbox"/> Municipal Court | <input type="checkbox"/> Technology or Communications |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Municipal Legislation | <input checked="" type="checkbox"/> Transportation or Mobility |
| <input type="checkbox"/> Contracts or Procurement | <input type="checkbox"/> Neighborhoods | <input type="checkbox"/> Zoning or Platting |
| <input type="checkbox"/> Diversity, Equity, or Inclusion | <input type="checkbox"/> Parks, Recreation, Libraries, or Museums | |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Other: <input style="width: 500px;" type="text"/> | |

Add Additional Municipal Question

Delete this page



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Permitting of telecommunications infrastructure																		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	<input type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description is required.																		
	<table style="width: 100%; border: none;"> <tr> <td style="border: none;">Address</td> <td colspan="2" style="border: none;">Suite or Apartment Number</td> </tr> <tr> <td style="border: 1px solid black; width: 60%; height: 25px;"></td> <td colspan="2" style="border: 1px solid black; width: 40%; height: 25px;"></td> </tr> <tr> <td style="border: none;">City</td> <td style="border: none;">State</td> <td style="border: none;">Zip Code</td> </tr> <tr> <td style="border: 1px solid black; width: 60%; height: 25px;"></td> <td style="border: 1px solid black; width: 15%; height: 25px;"></td> <td style="border: 1px solid black; width: 25%; height: 25px;"></td> </tr> <tr> <td colspan="3" style="border: none;">Property Legal Description</td> </tr> <tr> <td colspan="3" style="border: 1px solid black; height: 30px;"></td> </tr> </table>	Address	Suite or Apartment Number					City	State	Zip Code				Property Legal Description					
Address	Suite or Apartment Number																		
City	State	Zip Code																	
Property Legal Description																			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|---|---|
| <input type="checkbox"/> Accessibility or Persons with Disabilities | <input type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input type="checkbox"/> Permits (Building, Site Plans) |
| <input type="checkbox"/> Affordability | <input type="checkbox"/> Finance, Budget, or Investments | <input checked="" type="checkbox"/> Permits (Other) |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center | <input type="checkbox"/> Quality of Life Affairs |
| <input type="checkbox"/> Aviation | <input type="checkbox"/> Human Rights or Immigration | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> City Infrastructure or Public Works | <input type="checkbox"/> Labor or Workforce | <input type="checkbox"/> Rules, Proposed Rules, or Rule Making |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input type="checkbox"/> Land Development or Land Use | <input type="checkbox"/> Taxation or Fees |
| <input type="checkbox"/> Code Compliance | <input type="checkbox"/> Municipal Court | <input checked="" type="checkbox"/> Technology or Communications |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Municipal Legislation | <input type="checkbox"/> Transportation or Mobility |
| <input type="checkbox"/> Contracts or Procurement | <input type="checkbox"/> Neighborhoods | <input type="checkbox"/> Zoning or Platting |
| <input type="checkbox"/> Diversity, Equity, or Inclusion | <input type="checkbox"/> Parks, Recreation, Libraries, or Museums | |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Other: <input style="width: 500px;" type="text"/> | |

Add Additional Municipal Question

Delete this page



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Transportation site plan																
PROPERTY ADDRESS OR LEGAL DESCRIPTION	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description is required.																
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;">Address</td> <td style="width: 40%; border-bottom: 1px solid black;">Suite or Apartment Number</td> </tr> <tr> <td style="border-bottom: 1px solid black;">801 W 24th St</td> <td style="border-bottom: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">City</td> <td style="border-bottom: 1px solid black;">State</td> <td style="border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Austin</td> <td style="border-bottom: 1px solid black;">TX</td> <td style="border-bottom: 1px solid black;">78705</td> </tr> <tr> <td colspan="3" style="border-bottom: 1px solid black;">Property Legal Description</td> </tr> <tr> <td colspan="3" style="border-bottom: 1px solid black;"></td> </tr> </table>	Address	Suite or Apartment Number	801 W 24th St		City	State	Zip Code	Austin	TX	78705	Property Legal Description					
Address	Suite or Apartment Number																
801 W 24th St																	
City	State	Zip Code															
Austin	TX	78705															
Property Legal Description																	

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|---|---|
| <input type="checkbox"/> Accessibility or Persons with Disabilities | <input type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building, Site Plans) |
| <input type="checkbox"/> Affordability | <input type="checkbox"/> Finance, Budget, or Investments | <input type="checkbox"/> Permits (Other) |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center | <input type="checkbox"/> Quality of Life Affairs |
| <input type="checkbox"/> Aviation | <input type="checkbox"/> Human Rights or Immigration | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> City Infrastructure or Public Works | <input type="checkbox"/> Labor or Workforce | <input type="checkbox"/> Rules, Proposed Rules, or Rule Making |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input type="checkbox"/> Land Development or Land Use | <input type="checkbox"/> Taxation or Fees |
| <input type="checkbox"/> Code Compliance | <input type="checkbox"/> Municipal Court | <input type="checkbox"/> Technology or Communications |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Municipal Legislation | <input type="checkbox"/> Transportation or Mobility |
| <input type="checkbox"/> Contracts or Procurement | <input type="checkbox"/> Neighborhoods | <input type="checkbox"/> Zoning or Platting |
| <input type="checkbox"/> Diversity, Equity, or Inclusion | <input type="checkbox"/> Parks, Recreation, Libraries, or Museums | |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Other: | |

Add Additional Municipal Question

Delete this page



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning																
PROPERTY ADDRESS OR LEGAL DESCRIPTION	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description is required.																
	<table style="width: 100%; border: none;"> <tr> <td style="border: none;">Address</td> <td style="border: none;">Suite or Apartment Number</td> </tr> <tr> <td style="border: 1px solid black; background-color: #f8d7da;">2514 Thrasher Lane</td> <td style="border: 1px solid black; background-color: #f8d7da;"></td> </tr> <tr> <td style="border: none;">City</td> <td style="border: none;">State</td> <td style="border: none;">Zip Code</td> </tr> <tr> <td style="border: 1px solid black; background-color: #f8d7da;">Austin</td> <td style="border: 1px solid black; background-color: #f8d7da;">TX</td> <td style="border: 1px solid black; background-color: #f8d7da;">78741</td> </tr> <tr> <td colspan="3" style="border: none;">Property Legal Description</td> </tr> <tr> <td colspan="3" style="border: 1px solid black; background-color: #f8d7da;"></td> </tr> </table>	Address	Suite or Apartment Number	2514 Thrasher Lane		City	State	Zip Code	Austin	TX	78741	Property Legal Description					
Address	Suite or Apartment Number																
2514 Thrasher Lane																	
City	State	Zip Code															
Austin	TX	78741															
Property Legal Description																	

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|---|---|
| <input type="checkbox"/> Accessibility or Persons with Disabilities | <input type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input type="checkbox"/> Permits (Building, Site Plans) |
| <input type="checkbox"/> Affordability | <input type="checkbox"/> Finance, Budget, or Investments | <input type="checkbox"/> Permits (Other) |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center | <input type="checkbox"/> Quality of Life Affairs |
| <input type="checkbox"/> Aviation | <input type="checkbox"/> Human Rights or Immigration | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> City Infrastructure or Public Works | <input type="checkbox"/> Labor or Workforce | <input type="checkbox"/> Rules, Proposed Rules, or Rule Making |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input type="checkbox"/> Land Development or Land Use | <input type="checkbox"/> Taxation or Fees |
| <input type="checkbox"/> Code Compliance | <input type="checkbox"/> Municipal Court | <input type="checkbox"/> Technology or Communications |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Municipal Legislation | <input type="checkbox"/> Transportation or Mobility |
| <input type="checkbox"/> Contracts or Procurement | <input type="checkbox"/> Neighborhoods | <input checked="" type="checkbox"/> Zoning or Platting |
| <input type="checkbox"/> Diversity, Equity, or Inclusion | <input type="checkbox"/> Parks, Recreation, Libraries, or Museums | |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Other: <input style="width: 500px;" type="text"/> | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Property taxes																
PROPERTY ADDRESS OR LEGAL DESCRIPTION	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description is required.																
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;">Address</td> <td style="width: 40%; border-bottom: 1px solid black;">Suite or Apartment Number</td> </tr> <tr> <td style="border: 1px solid black;">1500 Manana Street</td> <td style="border: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">City</td> <td style="border-bottom: 1px solid black;">State</td> <td style="border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td style="border: 1px solid black;">Austin</td> <td style="border: 1px solid black;">TX</td> <td style="border: 1px solid black;">78730</td> </tr> <tr> <td colspan="3" style="border-bottom: 1px solid black;">Property Legal Description</td> </tr> <tr> <td colspan="3" style="border: 1px solid black;"></td> </tr> </table>	Address	Suite or Apartment Number	1500 Manana Street		City	State	Zip Code	Austin	TX	78730	Property Legal Description					
Address	Suite or Apartment Number																
1500 Manana Street																	
City	State	Zip Code															
Austin	TX	78730															
Property Legal Description																	

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|---|---|
| <input type="checkbox"/> Accessibility or Persons with Disabilities | <input type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input type="checkbox"/> Permits (Building, Site Plans) |
| <input type="checkbox"/> Affordability | <input type="checkbox"/> Finance, Budget, or Investments | <input type="checkbox"/> Permits (Other) |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| <input checked="" type="checkbox"/> Annexation | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center | <input type="checkbox"/> Quality of Life Affairs |
| <input type="checkbox"/> Aviation | <input type="checkbox"/> Human Rights or Immigration | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> City Infrastructure or Public Works | <input type="checkbox"/> Labor or Workforce | <input type="checkbox"/> Rules, Proposed Rules, or Rule Making |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input type="checkbox"/> Land Development or Land Use | <input checked="" type="checkbox"/> Taxation or Fees |
| <input type="checkbox"/> Code Compliance | <input type="checkbox"/> Municipal Court | <input type="checkbox"/> Technology or Communications |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Municipal Legislation | <input type="checkbox"/> Transportation or Mobility |
| <input type="checkbox"/> Contracts or Procurement | <input type="checkbox"/> Neighborhoods | <input type="checkbox"/> Zoning or Platting |
| <input type="checkbox"/> Diversity, Equity, or Inclusion | <input type="checkbox"/> Parks, Recreation, Libraries, or Museums | |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Other: <input style="width: 500px;" type="text"/> | |

Add Additional Municipal Question

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Street Patio																
PROPERTY ADDRESS OR LEGAL DESCRIPTION	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description is required.																
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Address</td> <td style="width: 40%; padding: 2px;">Suite or Apartment Number</td> </tr> <tr> <td style="border: 1px solid black; background-color: #f8d7da;">900 Congress Avenue</td> <td style="border: 1px solid black; background-color: #f8d7da;"></td> </tr> <tr> <td style="padding: 2px;">City</td> <td style="padding: 2px;">State</td> <td style="padding: 2px;">Zip Code</td> </tr> <tr> <td style="border: 1px solid black; background-color: #f8d7da;">Austin</td> <td style="border: 1px solid black; background-color: #f8d7da;">TX</td> <td style="border: 1px solid black; background-color: #f8d7da;">78701</td> </tr> <tr> <td colspan="3" style="padding: 2px;">Property Legal Description</td> </tr> <tr> <td colspan="3" style="border: 1px solid black; background-color: #f8d7da;"></td> </tr> </table>	Address	Suite or Apartment Number	900 Congress Avenue		City	State	Zip Code	Austin	TX	78701	Property Legal Description					
Address	Suite or Apartment Number																
900 Congress Avenue																	
City	State	Zip Code															
Austin	TX	78701															
Property Legal Description																	

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|---|---|
| <input type="checkbox"/> Accessibility or Persons with Disabilities | <input type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input type="checkbox"/> Permits (Building, Site Plans) |
| <input type="checkbox"/> Affordability | <input type="checkbox"/> Finance, Budget, or Investments | <input checked="" type="checkbox"/> Permits (Other) |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center | <input type="checkbox"/> Quality of Life Affairs |
| <input type="checkbox"/> Aviation | <input type="checkbox"/> Human Rights or Immigration | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> City Infrastructure or Public Works | <input type="checkbox"/> Labor or Workforce | <input type="checkbox"/> Rules, Proposed Rules, or Rule Making |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input type="checkbox"/> Land Development or Land Use | <input type="checkbox"/> Taxation or Fees |
| <input type="checkbox"/> Code Compliance | <input type="checkbox"/> Municipal Court | <input type="checkbox"/> Technology or Communications |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Municipal Legislation | <input type="checkbox"/> Transportation or Mobility |
| <input type="checkbox"/> Contracts or Procurement | <input type="checkbox"/> Neighborhoods | <input type="checkbox"/> Zoning or Platting |
| <input type="checkbox"/> Diversity, Equity, or Inclusion | <input type="checkbox"/> Parks, Recreation, Libraries, or Museums | |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Other: | |

Add Additional Municipal Question

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning																
PROPERTY ADDRESS OR LEGAL DESCRIPTION	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description is required.																
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;">Address</td> <td style="width: 40%; border-bottom: 1px solid black;">Suite or Apartment Number</td> </tr> <tr> <td style="border: 1px solid black;">2408 Leon Street</td> <td style="border: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">City</td> <td style="border-bottom: 1px solid black;">State</td> <td style="border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td style="border: 1px solid black;">Austin</td> <td style="border: 1px solid black;">TX</td> <td style="border: 1px solid black;">78705</td> </tr> <tr> <td colspan="3" style="border-bottom: 1px solid black;">Property Legal Description</td> </tr> <tr> <td colspan="3" style="border: 1px solid black;"></td> </tr> </table>	Address	Suite or Apartment Number	2408 Leon Street		City	State	Zip Code	Austin	TX	78705	Property Legal Description					
Address	Suite or Apartment Number																
2408 Leon Street																	
City	State	Zip Code															
Austin	TX	78705															
Property Legal Description																	

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|---|---|
| <input type="checkbox"/> Accessibility or Persons with Disabilities | <input type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input type="checkbox"/> Permits (Building, Site Plans) |
| <input type="checkbox"/> Affordability | <input type="checkbox"/> Finance, Budget, or Investments | <input type="checkbox"/> Permits (Other) |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center | <input type="checkbox"/> Quality of Life Affairs |
| <input type="checkbox"/> Aviation | <input type="checkbox"/> Human Rights or Immigration | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> City Infrastructure or Public Works | <input type="checkbox"/> Labor or Workforce | <input type="checkbox"/> Rules, Proposed Rules, or Rule Making |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input type="checkbox"/> Land Development or Land Use | <input type="checkbox"/> Taxation or Fees |
| <input type="checkbox"/> Code Compliance | <input type="checkbox"/> Municipal Court | <input type="checkbox"/> Technology or Communications |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Municipal Legislation | <input type="checkbox"/> Transportation or Mobility |
| <input type="checkbox"/> Contracts or Procurement | <input type="checkbox"/> Neighborhoods | <input checked="" type="checkbox"/> Zoning or Platting |
| <input type="checkbox"/> Diversity, Equity, or Inclusion | <input type="checkbox"/> Parks, Recreation, Libraries, or Museums | |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Other: <input style="width: 50px;" type="text"/> | |

Add Additional Municipal Question

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Platting variance																
PROPERTY ADDRESS OR LEGAL DESCRIPTION	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description is required.																
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; border-bottom: 1px solid black;">Address</td> <td style="width: 40%; border-bottom: 1px solid black;">Suite or Apartment Number</td> </tr> <tr> <td style="border: 1px solid black;">1403 Possum Trot</td> <td style="border: 1px solid black;"></td> </tr> <tr> <td style="border-bottom: 1px solid black;">City</td> <td style="border-bottom: 1px solid black;">State</td> <td style="border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td style="border: 1px solid black;">Austin</td> <td style="border: 1px solid black;">TX</td> <td style="border: 1px solid black;">78703</td> </tr> <tr> <td colspan="3" style="border-bottom: 1px solid black;">Property Legal Description</td> </tr> <tr> <td colspan="3" style="border: 1px solid black;"></td> </tr> </table>	Address	Suite or Apartment Number	1403 Possum Trot		City	State	Zip Code	Austin	TX	78703	Property Legal Description					
Address	Suite or Apartment Number																
1403 Possum Trot																	
City	State	Zip Code															
Austin	TX	78703															
Property Legal Description																	

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|---|---|
| <input type="checkbox"/> Accessibility or Persons with Disabilities | <input type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input type="checkbox"/> Permits (Building, Site Plans) |
| <input type="checkbox"/> Affordability | <input type="checkbox"/> Finance, Budget, or Investments | <input type="checkbox"/> Permits (Other) |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center | <input type="checkbox"/> Quality of Life Affairs |
| <input type="checkbox"/> Aviation | <input type="checkbox"/> Human Rights or Immigration | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> City Infrastructure or Public Works | <input type="checkbox"/> Labor or Workforce | <input type="checkbox"/> Rules, Proposed Rules, or Rule Making |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input type="checkbox"/> Land Development or Land Use | <input type="checkbox"/> Taxation or Fees |
| <input type="checkbox"/> Code Compliance | <input type="checkbox"/> Municipal Court | <input type="checkbox"/> Technology or Communications |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Municipal Legislation | <input type="checkbox"/> Transportation or Mobility |
| <input type="checkbox"/> Contracts or Procurement | <input type="checkbox"/> Neighborhoods | <input checked="" type="checkbox"/> Zoning or Platting |
| <input type="checkbox"/> Diversity, Equity, or Inclusion | <input type="checkbox"/> Parks, Recreation, Libraries, or Museums | |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Other: <input style="width: 50px;" type="text"/> | |

Add Additional Municipal Question

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
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To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Affordable housing proposal																
PROPERTY ADDRESS OR LEGAL DESCRIPTION	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description is required.																
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 2px;">Address</td> <td style="width: 40%; padding: 2px;">Suite or Apartment Number</td> </tr> <tr> <td style="padding: 2px;">411 Chicon Street</td> <td style="padding: 2px;"></td> </tr> <tr> <td style="padding: 2px;">City</td> <td style="padding: 2px;">State</td> <td style="padding: 2px;">Zip Code</td> </tr> <tr> <td style="padding: 2px;">Austin</td> <td style="padding: 2px;">TX</td> <td style="padding: 2px;">78702</td> </tr> <tr> <td colspan="3" style="padding: 2px;">Property Legal Description</td> </tr> <tr> <td colspan="3" style="padding: 2px;"></td> </tr> </table>	Address	Suite or Apartment Number	411 Chicon Street		City	State	Zip Code	Austin	TX	78702	Property Legal Description					
Address	Suite or Apartment Number																
411 Chicon Street																	
City	State	Zip Code															
Austin	TX	78702															
Property Legal Description																	

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|---|---|
| <input type="checkbox"/> Accessibility or Persons with Disabilities | <input type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input type="checkbox"/> Permits (Building, Site Plans) |
| <input checked="" type="checkbox"/> Affordability | <input type="checkbox"/> Finance, Budget, or Investments | <input type="checkbox"/> Permits (Other) |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center | <input type="checkbox"/> Quality of Life Affairs |
| <input type="checkbox"/> Aviation | <input type="checkbox"/> Human Rights or Immigration | <input checked="" type="checkbox"/> Real Estate |
| <input type="checkbox"/> City Infrastructure or Public Works | <input type="checkbox"/> Labor or Workforce | <input type="checkbox"/> Rules, Proposed Rules, or Rule Making |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use | <input type="checkbox"/> Taxation or Fees |
| <input type="checkbox"/> Code Compliance | <input type="checkbox"/> Municipal Court | <input type="checkbox"/> Technology or Communications |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Municipal Legislation | <input type="checkbox"/> Transportation or Mobility |
| <input type="checkbox"/> Contracts or Procurement | <input type="checkbox"/> Neighborhoods | <input type="checkbox"/> Zoning or Platting |
| <input type="checkbox"/> Diversity, Equity, or Inclusion | <input type="checkbox"/> Parks, Recreation, Libraries, or Museums | |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Other: <input style="width: 500px;" type="text"/> | |

Add Additional Municipal Question

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 2: Municipal Question

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*																	
PROPERTY ADDRESS OR LEGAL DESCRIPTION	<input type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description is required.																
	<table style="width: 100%; border: none;"> <tr> <td style="border: none;">Address</td> <td style="border: none;">Suite or Apartment Number</td> </tr> <tr> <td style="border: 1px solid black; height: 25px;"></td> <td style="border: 1px solid black; height: 25px;"></td> </tr> <tr> <td style="border: none;">City</td> <td style="border: none;">State</td> <td style="border: none;">Zip Code</td> </tr> <tr> <td style="border: 1px solid black; height: 25px;"></td> <td style="border: 1px solid black; height: 25px;"></td> <td style="border: 1px solid black; height: 25px;"></td> </tr> <tr> <td colspan="3" style="border: none;">Property Legal Description</td> </tr> <tr> <td colspan="3" style="border: 1px solid black; height: 30px;"></td> </tr> </table>	Address	Suite or Apartment Number			City	State	Zip Code				Property Legal Description					
Address	Suite or Apartment Number																
City	State	Zip Code															
Property Legal Description																	

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|---|---|
| <input type="checkbox"/> Accessibility or Persons with Disabilities | <input type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input type="checkbox"/> Permits (Building, Site Plans) |
| <input type="checkbox"/> Affordability | <input type="checkbox"/> Finance, Budget, or Investments | <input type="checkbox"/> Permits (Other) |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center | <input type="checkbox"/> Quality of Life Affairs |
| <input type="checkbox"/> Aviation | <input type="checkbox"/> Human Rights or Immigration | <input type="checkbox"/> Real Estate |
| <input type="checkbox"/> City Infrastructure or Public Works | <input type="checkbox"/> Labor or Workforce | <input type="checkbox"/> Rules, Proposed Rules, or Rule Making |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input type="checkbox"/> Land Development or Land Use | <input type="checkbox"/> Taxation or Fees |
| <input type="checkbox"/> Code Compliance | <input type="checkbox"/> Municipal Court | <input type="checkbox"/> Technology or Communications |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Municipal Legislation | <input type="checkbox"/> Transportation or Mobility |
| <input type="checkbox"/> Contracts or Procurement | <input type="checkbox"/> Neighborhoods | <input type="checkbox"/> Zoning or Platting |
| <input type="checkbox"/> Diversity, Equity, or Inclusion | <input type="checkbox"/> Parks, Recreation, Libraries, or Museums | |
| <input type="checkbox"/> Economic Development | <input type="checkbox"/> Other: | |

Add Additional Municipal Question

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	<input type="checkbox"/> I represented no clients and received no client compensation during the applicable reporting period																		
CLIENT NAME <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* <input type="text" value="Keep Real Estate"/>																		
CLIENT ADDRESS AND NATURE OF BUSINESS	<table border="1" style="width: 100%;"> <tr> <td>Client Business Address*</td> <td colspan="2">Client Apartment or Suite Number</td> </tr> <tr> <td><input type="text" value="905 Nueces Street"/></td> <td colspan="2"><input type="text"/></td> </tr> <tr> <td>Client City*</td> <td>Client State*</td> <td>Client Zip Code*</td> </tr> <tr> <td><input type="text" value="Austin"/></td> <td><input type="text" value="TX"/></td> <td><input type="text" value="78701"/></td> </tr> <tr> <td colspan="3">Nature of Client's Business*</td> </tr> <tr> <td colspan="3"><input type="text" value="Real Estate"/></td> </tr> </table>	Client Business Address*	Client Apartment or Suite Number		<input type="text" value="905 Nueces Street"/>	<input type="text"/>		Client City*	Client State*	Client Zip Code*	<input type="text" value="Austin"/>	<input type="text" value="TX"/>	<input type="text" value="78701"/>	Nature of Client's Business*			<input type="text" value="Real Estate"/>		
Client Business Address*	Client Apartment or Suite Number																		
<input type="text" value="905 Nueces Street"/>	<input type="text"/>																		
Client City*	Client State*	Client Zip Code*																	
<input type="text" value="Austin"/>	<input type="text" value="TX"/>	<input type="text" value="78701"/>																	
Nature of Client's Business*																			
<input type="text" value="Real Estate"/>																			

Section 3b: Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/> OR (\$) Exact Amount <input type="text"/> Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max): <input type="text" value="Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code."/>
----------------------------	--

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	<input type="checkbox"/> I represented no clients and received no client compensation during the applicable reporting period				
CLIENT NAME <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* <input type="text" value="Cielo Property Group"/>				
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="823 Congress Avenue"/>	Client Apartment or Suite Number <input type="text" value="600"/>	Client City* <input type="text" value="Austin"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78701"/>
	Nature of Client's Business* <input type="text" value="Real Estate"/>				

Section 3b: Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/> OR (\$) Exact Amount <input type="text"/>	
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):	
	<input type="text" value="Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code."/>	

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	<input type="checkbox"/> I represented no clients and received no client compensation during the applicable reporting period
-----------------------------	--

CLIENT NAME <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* <input type="text" value="Crown Castle"/>
--	--

CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="1220 Augusta Drive"/>	Client Apartment or Suite Number <input type="text"/>	
	Client City* <input type="text" value="Houston"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="77057"/>
	Nature of Client's Business* <input type="text" value="Telecommunications"/>		
	<input type="text"/>		

Section 3b: Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/> OR (\$) Exact Amount <input type="text"/> Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max): <input type="text" value="Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code."/>
----------------------------	--

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	<input type="checkbox"/> I represented no clients and received no client compensation during the applicable reporting period
-----------------------------	--

CLIENT NAME			
<input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable*		
	Landmark		

CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*	Client Apartment or Suite Number	
	315 Oconee Street		
	Client City*	Client State*	Client Zip Code*
	Athens	GA	30601
	Nature of Client's Business*		
	Real Estate		

Section 3b: Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/> OR (\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max): <input type="text"/>
	Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	<input type="checkbox"/> I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title	Client First Name*	Middle
<input checked="" type="checkbox"/> Client is an individual		John	
	Organization Name or Client Last Name, as applicable*	Client Suffix	
	Stratton		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*	Client Apartment or Suite Number	
	PO Box 2232		
	Client City*	Client State*	Client Zip Code*
	Austin	TX	78768
	Nature of Client's Business*		
	Individual		

Section 3b: Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/> OR (\$) Exact Amount <input type="text"/>
	<p>Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.</p> <p>If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):</p> <div style="border: 1px solid black; padding: 5px;"> <p>Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.</p> </div>

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	<input type="checkbox"/> I represented no clients and received no client compensation during the applicable reporting period
-----------------------------	--

CLIENT NAME	Client Title	Client First Name*	Middle
	<input type="text"/>	Nikki	<input type="text"/>
<input checked="" type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable*		Client Suffix
	Zern		<input type="text"/>

CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*		Client Apartment or Suite Number	
	1500 Manana Street		<input type="text"/>	
	Client City*	Client State*	Client Zip Code*	
	Austin	TX	78730	
Nature of Client's Business*				
Individual				

Section 3b: Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*	OR	(\$) Exact Amount
	<input type="text"/>		<input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.			

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<p>NO CLIENTS TO REPORT</p>	<p><input type="checkbox"/> I represented no clients and received no client compensation during the applicable reporting period</p>																		
<p>CLIENT NAME</p> <p><input type="checkbox"/> Client is an individual</p>	<p>Organization Name or Client Last Name, as applicable*</p> <p>CPG, LLC</p>																		
<p>CLIENT ADDRESS AND NATURE OF BUSINESS</p>	<table border="1"> <tr> <td>Client Business Address*</td> <td colspan="2">Client Apartment or Suite Number</td> </tr> <tr> <td>823 Congress Avenue</td> <td colspan="2">600</td> </tr> <tr> <td>Client City*</td> <td>Client State*</td> <td>Client Zip Code*</td> </tr> <tr> <td>Austin</td> <td>TX</td> <td>78701</td> </tr> <tr> <td colspan="3">Nature of Client's Business*</td> </tr> <tr> <td colspan="3">Real Estate</td> </tr> </table>	Client Business Address*	Client Apartment or Suite Number		823 Congress Avenue	600		Client City*	Client State*	Client Zip Code*	Austin	TX	78701	Nature of Client's Business*			Real Estate		
Client Business Address*	Client Apartment or Suite Number																		
823 Congress Avenue	600																		
Client City*	Client State*	Client Zip Code*																	
Austin	TX	78701																	
Nature of Client's Business*																			
Real Estate																			

Section 3b: Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<p>CLIENT COMPENSATION</p>	<table border="1"> <tr> <td>Compensation Category*</td> <td>OR</td> <td>(\$) Exact Amount</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table> <p>Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.</p> <p>If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):</p> <p>Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.</p>	Compensation Category*	OR	(\$) Exact Amount			
Compensation Category*	OR	(\$) Exact Amount					

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<p>NO CLIENTS TO REPORT</p>	<p><input type="checkbox"/> I represented no clients and received no client compensation during the applicable reporting period</p>
<p>CLIENT NAME</p> <p><input type="checkbox"/> Client is an individual</p>	<p>Organization Name or Client Last Name, as applicable*</p> <p>Arlington Capital Austin, LLC</p>
<p>CLIENT ADDRESS AND NATURE OF BUSINESS</p>	<p>Client Business Address* 1776 Broadway</p> <p>Client Apartment or Suite Number</p> <p>Client City* New York</p> <p>Client State* NY</p> <p>Client Zip Code* 10079</p> <p>Nature of Client's Business* Real Estate</p>

Section 3b: Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<p>CLIENT COMPENSATION</p>	<p>Compensation Category* OR (\$) Exact Amount</p> <p>Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.</p> <p>If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):</p> <p>Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.</p>
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* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	<input type="checkbox"/> I represented no clients and received no client compensation during the applicable reporting period
-----------------------------	--

CLIENT NAME	Client Title	Client First Name*	Middle
		Larry and Elizabeth	
<input checked="" type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable*		Client Suffix
	Petree		

CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*		Client Apartment or Suite Number	
	9207 Vicksberg Avenue			
	Client City*	Client State*	Client Zip Code*	
	Lubbock	TX	79424	
	Nature of Client's Business*			
	Individual			

Section 3b: Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*	OR	(\$) Exact Amount
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
	Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	<input type="checkbox"/> I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title	Client First Name*	Middle
<input checked="" type="checkbox"/> Client is an individual		Oam	
	Organization Name or Client Last Name, as applicable*	Client Suffix	
	Parkash		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*	Client Apartment or Suite Number	
	1403 Possum Trot		
	Client City*	Client State*	Client Zip Code*
	Austin	TX	78703
	Nature of Client's Business*		
	Individual		

Section 3b: Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*	OR	(\$) Exact Amount
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max):		
	Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	<input type="checkbox"/> I represented no clients and received no client compensation during the applicable reporting period																		
CLIENT NAME <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* <input type="text" value="Ojala Holdings"/>																		
CLIENT ADDRESS AND NATURE OF BUSINESS	<table border="1" style="width: 100%;"> <tr> <td>Client Business Address*</td> <td colspan="2">Client Apartment or Suite Number</td> </tr> <tr> <td><input type="text" value="6440 N Central Expressway"/></td> <td colspan="2"><input type="text"/></td> </tr> <tr> <td>Client City*</td> <td>Client State*</td> <td>Client Zip Code*</td> </tr> <tr> <td><input type="text" value="Dallas"/></td> <td><input type="text" value="TX"/></td> <td><input type="text" value="75206"/></td> </tr> <tr> <td colspan="3">Nature of Client's Business*</td> </tr> <tr> <td colspan="3"><input type="text" value="Real Estate"/></td> </tr> </table>	Client Business Address*	Client Apartment or Suite Number		<input type="text" value="6440 N Central Expressway"/>	<input type="text"/>		Client City*	Client State*	Client Zip Code*	<input type="text" value="Dallas"/>	<input type="text" value="TX"/>	<input type="text" value="75206"/>	Nature of Client's Business*			<input type="text" value="Real Estate"/>		
Client Business Address*	Client Apartment or Suite Number																		
<input type="text" value="6440 N Central Expressway"/>	<input type="text"/>																		
Client City*	Client State*	Client Zip Code*																	
<input type="text" value="Dallas"/>	<input type="text" value="TX"/>	<input type="text" value="75206"/>																	
Nature of Client's Business*																			
<input type="text" value="Real Estate"/>																			

Section 3b: Client Compensation

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/> OR (\$) Exact Amount <input type="text"/> Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max): <input type="text" value="Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code."/>
----------------------------	--

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 4: Employee

For each person employed or retained by the individual lobbyist for the purpose of assisting in or preparing for lobbying (excluding purely clerical or administrative assistance), provide a separate page with the information below (City Code Section 4-8-5(B)(4)(c)). If the lobbyist has retained no employees, leave this page blank.

For additional employees, click "Add Another Employee Page" below.

<p>NO EMPLOYEES TO REPORT</p>	<p><input checked="" type="checkbox"/> I employed or retained no employees during the applicable reporting period</p>
<p>PERSON EMPLOYED OR RETAINED</p>	<p>Title <input type="text"/> First Name* <input type="text"/> Middle <input type="text"/></p> <p>Last Name* <input type="text"/> Suffix <input type="text"/></p> <p>Employer* <input type="text"/> Occupation* <input type="text"/></p>
<p>BUSINESS ADDRESS</p>	<p>Business Address* <input type="text"/> Apartment or Suite Number <input type="text"/></p> <p>City* <input type="text"/> State* <input type="text"/> Zip Code* <input type="text"/></p>
<p>MAYOR/COUNCIL RELATIVE OR HOUSEHOLD MEMBER</p>	<p><input type="checkbox"/> Is the person identified above related (within the third degree of consanguinity) to the Mayor or a Council Member, or a member of their household, as defined in City Code Section 4-8-6(A)(5)?</p> <p>If yes, describe the nature of their employment *required if the above box is checked</p> <p><input type="text"/></p> <p>First Name of Mayor/Council Member <input type="text"/> Last Name of Mayor/Council Member <input type="text"/></p>

* Indicates a required field

Add Another Employee Page

Delete this page



Lobbyist Reporting Form

*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Sections 5, 6 and 7 are for filing Quarterly Activity Reports or a Termination of Lobbyist Registration.

If you are not submitting this form during a quarterly activity reporting deadline or to terminate your lobbyist registration, proceed directly to Section 8: Declaration and Electronic Submission.



Lobbyist Reporting Form

*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 5: Statement of No Activity

STATEMENT OF NO EXPENDITURES MADE AND NO COMPENSATION RECEIVED

Lobbyists who have **no reportable activity** for the reporting period must submit a Statement of No Activity to the Clerk's Office (City Code Section 4-8-6(D)).

By checking the **No Activity Confirmation**, I affirm that I have no reportable activity during this reporting period, as defined by the four conditions below.

- I received no Client Compensation during this activity period (§4-8-6(A)(2)).
- I made no Expenditures for lobbying during this activity period (§4-8-6(A)(3)).
- I have not exchanged money, goods, services, or anything of value totaling more than \$500 with a business entity in which a City Official has a substantial economic interest during this reporting period (§4-8-6(A)(4)).
- I have no employees who are household members or related (within third degree of consanguinity or affinity) to the Mayor or a Council Member to report during this reporting period (§4-8-6(A)(5)).

No Activity Confirmation

- I have read the four conditions above and confirm that I have no reportable activity to disclose during this reporting period



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 6: Expenditure Totals

Provide the total amount of expenditures for lobbying, sub-totaled by the categories listed below. A blank value will be interpreted as \$0 spent in that particular category (§4-8-6(A)(3)).

Cumulative expenditures of more than \$50 by an individual lobbyist per day per City Official in the expense categories listed below must be itemized on an Expenditure page.

EXPENDITURE TOTALS (Blank values will be interpreted as \$0)	(§) Reimbursement to Others	<input type="text"/>
	(§) Food and Beverages	<input type="text"/>
	(§) Transportation and Lodging	<input type="text"/>
	(§) Gifts (other than Awards and Mementos)	<input type="text"/>
	(§) Entertainment	<input type="text"/>
	(§) Awards and Mementos	<input type="text"/>
	(§) Honorariums	<input type="text"/>
	(§) Attendance of Council Members at Charitable Events or Fundraisers	<input type="text"/>
	(§) Media Communications (broadcast, print, advertising, etc.)	<input type="text"/>
	(§) Payments to persons who assist with Media Communications as defined in §4-8-6(A)(3)(j)	<input type="text"/>



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 7: Expenditure

For each itemized expenditure, provide a separate page with the information below. Cumulative expenditures of more than \$50 per day per City Official in the expense categories provided below must be itemized on an Expenditure Page (§4-8-6(A)(3)).

Per §4-8-6(A)(4), exchanges of money, goods, services, or anything of value to a business or business interest of a City Official that total \$500 or more during the reporting period must also be itemized on an Expenditure Page.

For additional expenditures, click "Add Another Expenditure Page" below.

<p>PAYEE NAME</p> <p>AND</p> <p>BUSINESS INTEREST</p> <p><input type="checkbox"/> Payee is an individual</p>	<p>Organization Name or Payee Last Name, as applicable*</p> <input style="width:100%;" type="text"/> <p><input type="checkbox"/> This payee is a business or business interest of a City Official</p> <p>If yes, First Name of City Official Last Name of City Official</p> <div style="display: flex; justify-content: space-between;"> <input style="width:45%;" type="text"/> <input style="width:45%;" type="text"/> </div> <p>Department of City Official Job Title of City Official</p> <div style="display: flex; justify-content: space-between;"> <input style="width:45%;" type="text"/> <input style="width:45%;" type="text"/> </div>
<p>PAYEE ADDRESS</p>	<p>Payee Address/ PO Box* Payee Apartment or Suite Number</p> <div style="display: flex; justify-content: space-between;"> <input style="width:45%;" type="text"/> <input style="width:45%;" type="text"/> </div> <p>Payee City* Payee State* Payee Zip Code*</p> <div style="display: flex; justify-content: space-between;"> <input style="width:30%;" type="text"/> <input style="width:15%;" type="text"/> <input style="width:30%;" type="text"/> </div>
<p>EXPENDITURE DETAILS</p>	<p>(\$) Expenditure Amount* Expenditure Date* Category*</p> <div style="display: flex; justify-content: space-between;"> <input style="width:25%;" type="text"/> <input style="width:25%;" type="text"/> <input style="width:40%;" type="text"/> </div> <p>Purpose of the Expenditure*</p> <input style="width:100%; height: 20px;" type="text"/>

Identify each City Official who benefitted from or who may have been influenced by the expenditure, if applicable

City Official First Name	City Official Last Name	Department	Job Title

Add Another Expenditure Page

Delete this page



Lobbyist Reporting Form

*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 8: Declaration and Electronic Submission

DECLARATION

By my signature below and subject to the penalty of perjury, I swear or affirm that the facts provided in this Lobbyist Reporting Form are true and correct to the best of my knowledge and belief and include all information required to be reported by me pursuant to City Code, Chapter 4-8.

I understand that pursuant to §4-8-9(E) of the Austin City Code, this report is made under oath regardless of whether there is any jurat or affidavit of verification, including a signature.

Leah Bojo

Typed Name

10/9/2017

Report Date*

Electronic Submission and Signature

- I have completed a **Lobbyist Contact Information Form**, and my signature and e-mail address are both on file at the City Clerk's Office.

New or Renewing Lobbyist Registrations are not considered complete until the appropriate registration fee has been paid. If you are registering for the first time as a lobbyist or are renewing your annual registration, you must remit payment via cash, check, or money order.